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ABSTRACT

This paper reviews the literature concerned with vocational placement and rehabilitation for individuals with severe mental disorders (SMD), and offers recommendations for rehabilitation counselors. It notes that about 85 percent of this population is unemployed, and the rate of job placement for people with SMD is about half that of other people with disabilities. The paper identifies barriers to job placement and rehabilitation counseling including societal discrimination, lack of marketable skills, and negative social skills. Strategies to combat these barriers are described, such as vocational counseling, disclosure counseling, marketing, self-advocacy promotion, skills training, and supported employment. Additionally, the use of reasonable accommodations for individuals with SMD are suggested, such as substitute workers, shortened work schedules, and shared jobs. A supported employment design is proposed which uses an integrated service approach combining both vocational and mental health services to address such on-the-job problems as forming and maintaining relationships, giving and receiving feedback, responding to social cues, and integrating work maintenance skills. (Contains 29 references.) (DB)

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Assisting People with Mental Illnesses in the Pursuit of Employment

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Abstract

Individuals with mental illnesses face numerous obstacles in obtaining and maintaining employment. Thus, increasing numbers of people with severe and life-long mental illnesses require vocational rehabilitation services. Vocational rehabilitation counselors encounter numerous challenges when working with individuals with serious mental disorders. For instance, societal discrimination, consumers' lack of marketable skills, and consumers' negative social skills are all barriers to successful employment. Strategies to combat these barriers are described including vocational counseling, disclosure counseling, marketing, self-advocacy promotion, skills training, and supported employment. Additionally, the use of reasonable accommodations for individuals with serious mental illnesses was addressed. Vocational rehabilitation counselors can serve an essential function by working with consumers and advocating for employment opportunities to improve the quality of life for individuals with serious mental disorders.

Key Words: Serious mental disorders, vocational rehabilitation counseling and employment

Assisting People with Mental Illness in the Pursuit of Employment

According the National Alliance for the Mentally Ill (1999), mental illness affects one in five American families, and 4 to 5 million adults are considered seriously mentally ill (Garske, 1999). One of the prevailing characteristics of serious mental disorders (SMDs) is difficulty obtaining and maintaining employment (Gerhart, 1990). There is extensive support from consumer self-reports and the literature that employment is beneficial for individuals with SMDs. For instance, work helps consumers feel a part of society, it connects them socially to other people, it provides opportunities for accomplishment, it builds on their strengths and enhances their self-esteem (Drake, McHugo, Becker, Anthony, & Clark, 1996; Fesko & Freedman, 1995; Hantula & Reilly, 1996; Mechanic, 1998; Scheid & Anderson, 1995). Most importantly, employment is associated with enhanced mental health among individuals with SMDs (Scheid & Anderson, 1995). Consequently, mental health professionals recently began to focus on identifying vocational services to help individuals with SMDs obtain competitive employment (Knox & Parmenter, 1993). This resulted in increased referrals of consumers with SMDs to vocational rehabilitation counselors. These counselors often find themselves lacking the skills necessary to assist consumers with SMDs (Garske, 1992). Therefore, although the significance of employment is well documented, vocational rehabilitation counselors appear to be ill prepared to help individuals with SMDs obtain suitable and gainful employment.

Vocational rehabilitation professionals agree that employment is an important part of life for persons with SMDs (VandeBoom & Lustig, 1997). However, competitive employment is rarely secured by people with SMDs (Drake et al., 1996); approximately 85% of this population is unemployed (National Institute on Disability and Rehabilitation Services [NIDR], 1993).

Further, the rate of job placement for people with SMDs is about half the rate of job placement for people with other disabilities (Marshak, Bostick, & Turton, 1990). The high unemployment rate for these consumers contradicts research that documents treatment and rehabilitation services for people with SMDs can significantly improve their employment outcomes (e.g., Marrone, Gandolfo, Gold, & Hoff, 1998; Noe, 1997). The intent of this article is to discuss the challenges to placing individuals with SMDs, followed by recommendations for rehabilitation counselors to utilize while assisting this population in the pursuit of employment.

Employment is consistent with the goals of normalization which involve decreasing individuals' with SMDs reliance on mental health services and increasing their ability to sustain productive lives in the community (Scheid, 1998). However, the vocational rehabilitation profession has not been successful in helping individuals with SMDs obtain and maintain competitive employment (Marrone, 1993; Noble, Honberg, Hall, & Flynn, 1999). Job placement for individuals with SMDs has been "...problematic at best and arguably, one of the most significant failures of the public and private rehabilitation systems in the United States" (Marrone et al., 1998, p. 37). Failure to achieve successful job placement may be partly due to the many barriers people with SMDs face when seeking employment. Most significant, is the fact that people with SMDs are overtly discriminated against in the job hiring process. Discrimination based on SMDs is one of the leading causes of complaints filed with the Equal Employment Opportunity Commission (Pardeck, 1999). Discrimination stems from an overall fear society has of individuals with SMDs. This fear is often due to the faulty correlation that is made between mental illness and violence (Mechanic, 1998; Pardeck, 1999). The media perpetuates this correlation as mental illness is frequently associated with violence and danger

(Noe, 1997). Data from a survey representative of the United States population, indicated that 30-70 percent of the sample perceived individuals with mental illnesses as violent (Pescosolido, Monahan, Link, Stueve, & Kikuzawa, 1997). Additional factors that contribute to discrimination towards individuals with SMDs are the effects of the illness on social behavior, lack of currently marketable skills among individuals with SMDs (Garske, 1999), and lack of value associated with hiring individuals with SMDs.

Although the previously mentioned barriers to placing individuals with SMDs are significant, the following recommendations serve to combat these obstacles. First, most individuals with SMDs need vocational counseling services. These services are important for individuals who have difficulty identifying and implementing realistic vocational plans. Vocational counseling must be geared toward forming feasible goals which are compatible with the consumer's interests, abilities and tolerance for stress. Significant attention must be paid to the consumer's concerns and anxieties about employment and the prospect of increasingly independent functioning.

Next, a skills training approach is useful to prepare consumers for the workforce (Garske, 1999). This approach involves conducting an analysis of job performance problems and identifying the skill deficits that are preventing the consumer from obtaining and maintaining employment. Typically the inability to maintain employment is related to a consumer's impaired interpersonal skills or an inability to cope with the pressures of employment. Therefore, coping skills are taught to consumers prevocationally as part of the skills training approach (Garske, 1992). For instance, training focuses on social and independent living skills, symptom management, interpersonal skills, and job seeking strategies (Garske, 1999).

In addition to strengthening consumers' skills, effective vocational rehabilitation programs focus on strengthening consumers' environmental supports (Garske, 1999). This involves the use of "natural" supports, or supports provided by the consumer's coworkers (Marrone et al., 1995; Slomka, 1996). Researchers found that individuals with SMDs were able to work during times of exacerbation of their illness when they worked in a positive environment which included employers and coworkers who supported them (Scheid & Anderson, 1995). Natural supports also emphasize social inclusion as they reduce the isolation that consumers often experience when external supports (such as job coaches) are used. Once the appropriate supports are identified, the rehabilitation counselor and consumer collaborate to develop a plan for using these supports in the consumer's environment (Davis, 1994).

Counselor and consumer collaboration in all phases of vocational rehabilitation is critical to long-term employment (Marrone & Gold, 1994). Job development must be a consumer driven process to enhance independence, responsibility and self-esteem among individuals with SMDs. Rehabilitation counselors should encourage and recognize the benefits of consumer involvement in the rehabilitation process (Noe, 1997).

In addition to involving consumers in the process, rehabilitation counselors must have positive attitudes regarding individuals with SMDs and employment. The most effective counselors are those who believe that people with SMDs can and should work as part of their rights and responsibilities (Marrone et al., 1998). Further, competent rehabilitation professionals provide support, information, positive thinking and hard work to place individuals with SMDs in competitive employment.

The most substantial component found in the literature which ascertained whether and how quickly individuals with SMDs got jobs, was the amount of time counselors spent on job development and placement (Gervey & Kowal, 1995). Job development is an arduous activity, therefore, determination and persistence is required by consumers and rehabilitation counselors for success in placement. In particular, it is important that professionals utilize a wide variety of job placement strategies when working with individuals with SMDs. Researchers found that counselors using numerous job development procedures were more likely to place individuals with disabilities in suitable and gainful employment than those using only one procedure (Bortnick & Ports, 1992). Likewise, rehabilitation counselors must be willing to advocate on behalf of their consumers during this phase to combat discriminatory hiring practices.

A successful advocating model for rehabilitation counselors to consider is derived from a marketing philosophy and tailored to the vocational rehabilitation process. Many professionals in the human service field are unaware of marketing techniques and do not recognize that job placement is dependent upon effective marketing (Marrone, 1993). Therefore, the following information is provided as a guide for rehabilitation counselors to utilize while marketing potential employers. It is important for counselors to remember that while they are marketing employers, their preliminary allegiance is with the vocational rehabilitation consumer (Marrone & Gold, 1994).

In the first step of the marketing model proposed by Marrone et al. (1998), the rehabilitation professional builds a relationship with the employer. As this relationship is developed, the rehabilitation professional gathers information in relation to the employer's needs, the challenges it faces, the direction it is headed, the businesses' operating procedures,

and the specific job requirements for open positions. Likewise, the rehabilitation counselor gathers information from the consumer in regards to his/her needs, values, abilities, motivators and barriers to employment. Once the data is sufficiently gathered and analyzed, the rehabilitation counselor and consumer determine if there is a sufficient fit between the needs of the employer and the needs of the consumer. If the fit is not mutually beneficial, the counselor starts at the beginning of the process with an additional employer. However, if the fit appears to be appropriate, the counselor continues with the next stage of the marketing activities. During this stage the counselor provides a positive perception of the agency he/she represents through good customer service, respect, responsiveness and professionalism. The counselor's goal is to demonstrate to the employer that the benefits of hiring the consumer outweigh the costs. Once this is demonstrated, placement is achieved.

The final stage of marketing involves dealing with employer objections to hiring the consumer. Five counseling techniques are used to address objections from the employer (Marrone et al., 1998). First, the counselor listens to what the employer has to say both verbally and nonverbally. Second, the counselor repeats and clarifies what the employer said to be sure the meaning is clear. The counselor acknowledges concern so that the employer knows the counselor understands his/her concern. Next, the counselor offers information to address the concern and mollify the objections that were raised. Finally, the counselor has the employer concur that the objections were addressed. If used appropriately, this procedure is instrumental in placing individuals with SMDs in gainful employment.

Another necessary component of placing consumers in gainful employment involves educating them about disability disclosure and the Americans with Disabilities Act (ADA) of

1990. Individuals with SMDs who disclose their disability risk discrimination in the hiring process (Scheid, 1998). However, individuals who do not disclose their disability find it hard to request an accommodation or use the ADA if discrimination occurs (Scheid, 1998). Vocational counselors must inform consumers that a goal of the ADA is to legally protect individuals with disabilities from discrimination. According to the ADA, employers cannot ask questions that are likely to result in information about an individual's disability before making a job offer (Pardeck, 1999). Therefore, questions on a job application focusing on mental illnesses are prohibited before an employment offer is made. The only situation when an employer may legally ask questions related to an applicant's disability, is after the offer is made (Pardeck, 1999). Further, if an employer has been informed of an applicant's disability, this information is confidential under the ADA. Other employees do not have a right to know about a co-worker's disability. Educating consumers about their rights is essential to promote self-advocacy and empowerment among individuals with SMDs.

After a consumer has received appropriate information about disclosure, he/she may decide to disclose his/her disabilities to an employer to request a reasonable accommodation. The ADA mandates that employers provide reasonable accommodations for employees who can perform the essential functions of the job, unless the accommodation would impose an undue hardship for the employer (Hantula & Reilly, 1996; Pardeck, 1999). Reasonable accommodations for persons with disabilities must be determined on a case-by-case basis due to the variability among work places and individuals with disabilities. SMDs are exhibited in behavior, therefore, more than the physical requirements of the job need to be modified. A reasonable accommodation for a person with a SMD (unlike a reasonable accommodation for a

person with physical disability) is commonly a management issue. Therefore, the manager is responsible for organizing and maintaining the job setting. Supervisory practices which emphasize individuals' with SMDs competence while preserving their dignity are the most effective (Hantula & Reilly, 1996).

Reasonable accommodations such as substitute workers, shortened work schedules and shared jobs helped consumers remain employed despite the problems of SMDs (Schied, 1998). However, employers were less inclined to make accommodations for individuals with SMDs than for individuals with physical disabilities (McDonald, Kulick, & Creighton, 1995; Michaels, Nappo, Barrett, Risucci, & Harles, 1993). Employers may be less likely to provide accommodations for individuals with SMDs due to the previously mentioned stereotypes that perpetuate fear towards these individuals.

Schied (1998) analyzed employers' perspectives toward hiring and making accommodations for individuals with SMDs. This research illustrated that employers were generally uncomfortable with employees with mental illnesses (Schied, 1998). However employers indicated that awareness training would be an effective strategy for improving these individuals' employment opportunities. Further, employers who had hired individuals with SMDs found the accommodations for these employees simple to make and inexpensive (Schied, 1998). The literature recommended that employers abide by performance management systems while making accommodations for individual with SMDs, as these systems emphasize individual performance (Hantula & Reilly, 1996). Additionally, performance management was sufficient in supervising diverse work behaviors, emphasizing positive approaches and keeping individual dignity and job satisfaction as a management responsibility (Hantula & Reilly, 1996).

Once employed, individuals with SMDs often encounter additional problems. These difficulties, such as trouble forming and maintaining relationship, responding to social cues, giving and receiving feedback and integrating work maintenance skills, must be addressed to ensure long-term success in employment. Supported employment is a program that helps combat obstacles encountered in the work environment. The supported employment program was specifically designed to serve individuals with the most significant disabilities to help them obtain and maintain competitive, integrated employment (Wehman, Revell, & Kregel, 1998). The barriers to successful employment are diminished through the use of employment specialists, mentors, coworkers and employers (Wehman et al., 1998). True integration involves social and physical proximity of individuals with and without disabilities. Therefore, supported employees must serve an integral part of the job and large numbers of individuals with SMDs should not be placed at any one job (Marrone & Gold, 1994).

Next, because individuals with SMDs often have difficulty developing relationships, vocational rehabilitation counselors advocate on their behalf to assure relationships are developed between consumers and their coworkers (Marrone & Gold, 1994). Rehabilitation counselors must be prepared to combat the stigma attached to SMDs. Often, the fear and stigma associated with SMDs is not influenced by the individual's behavior, but preconceived stereotypes. Therefore, the counselor provides an opportunity for consumers to get acquainted with their co-workers prior to commencing employment. This serves to eliminate preconceived stereotypes and to help the counselor determine if there are any co-workers willing to provide job-related support to the consumer.

One effective supported employment design is the individual placement and support model (Drake et al., 1996). This model uses an integrated service approach with vocational and mental health services combined within the same program. In the first step of the process, vocational counselors begin helping consumers find employment, therefore the preemployment skills training previously described is omitted. Once employment is obtained, the vocational rehabilitation agency provides training and follow-up supports as needed. This model assumes that consumers will learn about the job world, their skills and preferences on the job rather than in pre-employment training. Researchers demonstrated that this model was superior (to a pre-employment skills training model) in helping individuals with SMDs obtain and maintain competitive employment (Drake et al., 1996).

Regardless of the model that is used, placing individuals with SMDs can be a challenge to vocational rehabilitation counselors. However, with an appropriate proactive approach this challenge can be overcome. Vocational counselors must be willing to advocate on behalf of their consumers with SMDs through marketing procedures. These counselors need to target business groups and key regional employers. Informal lectures and educational brochures that dispute common myths about consumers with SMDs would help enhance the employment opportunities for individuals with SMDs (Schied, 1998). Further, employers must be educated about reasonable accommodations for individuals with SMD. For instance the necessity of changing workplace policies, adjusting schedules and supervision of work must be communicated (Pardeck, 1999; Schied, 1998). Rehabilitation counselors can play a vital role in return to work efforts for individuals with SMD. They must work in a partnership with consumers and advocate on their behalf to improve their overall quality of life.

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